


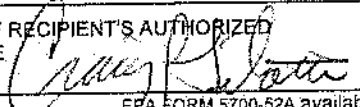
# **U.S. ENVIRONMENTAL PROTECTION AGENCY MBE/WBE UTILIZATION UNDER FEDERAL GRANTS AND COOPERATIVE AGREEMENTS**

## **PART I. (Reports are required even if no procurements are made during the reporting period.)**

<b>1A. FEDERAL FISCAL YEAR</b> (Oct. 1-Sep 30)  <u>2015</u>		<b>1B. REPORTING PERIOD</b> (Check ALL appropriate boxes) <input type="checkbox"/> 1 <sup>st</sup> (Oct-Dec) <input type="checkbox"/> 2 <sup>nd</sup> (Jan-Mar) <input type="checkbox"/> 3 <sup>rd</sup> (Apr-Jun) <input type="checkbox"/> 4 <sup>th</sup> (Jul-Sep) Semi-Annual (Oct-Mar)   Semi-Annual (Apr-Sep) <input checked="" type="checkbox"/> Annual Check if this is the last report for the project (Project completed).																				
<b>1C. REVISION OF A PRIOR REPORT?</b> <u>N</u> Year _____ Quarter _____		<b>BRIEFLY DESCRIBE THE REVISIONS YOU ARE MAKING:</b>																				
<b>2A. EPA FINANCIAL ASSISTANCE OFFICE ADDRESS</b> (ATTN: DBE Coordinator)  REG, 08, OTMS, 8TMS-G		<b>3A. RECIPIENT NAME AND ADDRESS</b> DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 144810 SALT LAKE CITY UT 84114-4810																				
<b>2B. EPA DBE COORDINATOR</b>  Name: MELISA DEVINCENZI  E-mail: <u>devincenzi.melisa@epa.gov</u>	<b>2C. PHONE:</b>  303-312-6499  Fax: 303-312-6685	<b>3B. RECIPIENT REPORTING CONTACT:</b>  Name: CRAIG SILOTTI  E-mail: <u>csilotti@utah.gov</u>	<b>3C. PHONE:</b>  801-536-4460  Fax: 801-536-4441																			
<b>4A. FINANCIAL ASSISTANCE AGREEMENT ID NUMBER</b> (SRF State Recipients, refer to Instructions for Completion of blocks 4A, 5A and 5C.) BC998475-11		<b>4B. FEDERAL FINANCIAL ASSISTANCE PROGRAM TITLE or CFDA NUMBER:</b>  66.605 - Performance Partnership Grant																				
<b>5A. TOTAL ASSISTANCE AGREEMENT AMOUNT</b> (SRF State Recipients, refer to Instructions for Completion of blocks 4A, 5A and 5C.)  EPA Share: \$ <u>31,353,419</u>  Recipient Share: \$ <u>12,501,103</u>		<b>5B. If NO procurement and NO accomplishments were made this reporting period (by the recipients, sub-recipients, loan recipients, and prime contractors), CHECK and SKIP to Block No. 7. (Procurements are all expenditures through contract, order, purchase, lease or barter of supplies, equipment, construction, or services needed to complete Federal assistance programs. Accomplishments, in this context, are procurements made with MBEs and/or WBEs.</b>																				
<b>5C. Total Procurements This Reporting Period</b> (Only include amount not reported in any prior reporting period)  Total Procurement Amount \$ (Include total dollar values awarded by recipient, sub-recipients and SRF loan recipients, including MBE/WBE expenditures.) <u>\$1,039,572.20</u>																						
<b>5D.</b> Were sub-awards issued under this assistance agreement? Yes ___ No <u>X</u> Were contracts issued under this assistance agreement? Yes <u>X</u> No ___																						
<b>5E. MBE/WBE Accomplishments This Reporting Period</b>  Actual MBE/WBE Procurement Accomplished: (Include total dollar values awarded by recipient, sub-recipients, SRF loan recipients and Prime Contractors.)																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center"><u>Construction</u></th> <th align="center"><u>Equipment</u></th> <th align="center"><u>Services</u></th> <th align="center"><u>Supplies</u></th> <th align="center"><u>Total</u></th> </tr> </thead> <tbody> <tr> <td><b>\$MBE:</b></td> <td align="center">\$ <u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> </tr> <tr> <td><b>\$WBE:</b></td> <td align="center">\$ <u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> <td align="center"><u>0</u></td> </tr> </tbody> </table>						<u>Construction</u>	<u>Equipment</u>	<u>Services</u>	<u>Supplies</u>	<u>Total</u>	<b>\$MBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<b>\$WBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<u>Construction</u>	<u>Equipment</u>	<u>Services</u>	<u>Supplies</u>	<u>Total</u>																	
<b>\$MBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>																	
<b>\$WBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>																	
<b>6. COMMENTS:</b> (If no MBE/WBE procurements were accomplished during the reporting period, please explain what steps you are taking to achieve the MBE/WBE Program requirements specified in the terms and conditions of the Assistance Agreement.)																						
<b>7. NAME OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b>  Craig Silotti		<b>TITLE</b>  Finance Director																				
<b>8. SIGNATURE OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> 		<b>DATE</b> October 26, 2015																				

# **U.S. ENVIRONMENTAL PROTECTION AGENCY MBE/WBE UTILIZATION UNDER FEDERAL GRANTS AND COOPERATIVE AGREEMENTS**

## **PART I. (Reports are required even if no procurements are made during the reporting period.)**

<b>1A. FEDERAL FISCAL YEAR</b> (Oct. 1-Sep 30) <u>2016</u>		<b>1B. REPORTING PERIOD</b> (Check ALL appropriate boxes) <input type="checkbox"/> 1 <sup>st</sup> (Oct-Dec) <input type="checkbox"/> 2 <sup>nd</sup> (Jan-Mar) <input type="checkbox"/> 3 <sup>rd</sup> (Apr-Jun) <input type="checkbox"/> 4 <sup>th</sup> (Jul-Sep) Semi-Annual (Oct-Mar)   Semi-Annual (Apr-Sep) <input checked="" type="checkbox"/> Annual Check if this is the last report for the project (Project completed).			
<b>1C. REVISION OF A PRIOR REPORT?</b> <u>N</u> Year: _____ Quarter: _____		<b>BRIEFLY DESCRIBE THE REVISIONS YOU ARE MAKING:</b>			
<b>2A. EPA FINANCIAL ASSISTANCE OFFICE ADDRESS</b> (ATTN: DBE Coordinator) REG; 08; OTMS; 8TMS-G		<b>3A. RECIPIENT NAME AND ADDRESS</b> DEPARTMENT OF ENVIRONMENTAL QUALITY PO BOX 144810 SALT LAKE CITY UT 84114-4810			
<b>2B. EPA DBE COORDINATOR</b> Name: SARAH HULSTEIN E-mail: <a href="mailto:Hulstein.Sarah@epa.gov">Hulstein.Sarah@epa.gov</a>	<b>2C. PHONE:</b> 303-312-6014 Fax: 303-312-6685	<b>3B. RECIPIENT REPORTING CONTACT:</b> Name: CRAIG SILOTTI E-mail: <a href="mailto:csilotti@utah.gov">csilotti@utah.gov</a>	<b>3C. PHONE:</b> 801-536-4460 Fax: 801-536-4441		
<b>4A. FINANCIAL ASSISTANCE AGREEMENT ID NUMBER</b> (SRF State Recipients, refer to Instructions for Completion of blocks 4A, 5A and 5C.) BG998475-16		<b>4B. FEDERAL FINANCIAL ASSISTANCE PROGRAM TITLE or CFDA NUMBER:</b> 66.605 - Performance Partnership Grant			
<b>5A. TOTAL ASSISTANCE AGREEMENT AMOUNT</b> (SRF State Recipients, refer to Instructions for Completion of blocks 4A, 5A and 5C.) EPA Share: \$ <u>4,363,312</u> Recipient Share: \$ <u>2,050,168</u>		<b>5B. If NO procurement and NO accomplishments were made this reporting period (by the recipients, sub-recipients, loan recipients, and prime contractors), CHECK and SKIP to Block No. 7. (Procurements are all expenditures through contract, order, purchase, lease or barter of supplies, equipment, construction, or services needed to complete Federal assistance programs. Accomplishments, in this context, are procurements made with MBEs and/or WBEs.</b>			
<b>5C. Total Procurements This Reporting Period</b> (Only include amount not reported in any prior reporting period) Total Procurement Amount \$ (Include total dollar values awarded by recipient, sub-recipients and SRF loan recipients, including MBE/WBE expenditures.) \$1,696,298.78					
<b>5D.</b> Were sub-awards issued under this assistance agreement? Yes___ No <u>X</u> Were contracts issued under this assistance agreement? Yes <u>X</u> No___					
<b>5E. MBE/WBE Accomplishments This Reporting Period</b> Actual MBE/WBE Procurement Accomplished: (Include total dollar values awarded by recipient, sub-recipients, SRF loan recipients and Prime Contractors.)					
	<u>Construction</u>	<u>Equipment</u>	<u>Services</u>	<u>Supplies</u>	<u>Total</u>
<b>\$MBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>\$WBE:</b>	\$ <u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>6. COMMENTS:</b> (If no MBE/WBE procurements were accomplished during the reporting period, please explain what steps you are taking to achieve the MBE/WBE Program requirements specified in the terms and conditions of the Assistance Agreement.)					
<b>7. NAME OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> Craig Silotti			<b>TITLE</b> Finance Director		
<b>8. SIGNATURE OF RECIPIENT'S AUTHORIZED REPRESENTATIVE</b> 			<b>DATE</b> November 7, 2016		